I hereby certify that this correspondence is being electronically filed in the United States Patent and Tyalemark Office on July 29/2011.

RESPONSE TO DECISION Docket No. TPI.5053C3XC1T

Frank C. Eisenschenk, Ph.D., Patent Attorney

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Art Unit : 1626

Applicants : Magali Bourghol Hickey, Matthew Peterson, Örn Almarsson, Michael J.

Zaworotko, Tanise Shattock, Jennifer McMahon, Joanna Bis, Julius F.

Remenar, Mark Tawa

Serial No. : 10/599,010

Filed: September 18, 2006

Conf. No. : 3133

For : Novel Pharmaceutical Forms, and Methods of Making and Using the Same

Mail Stop PETITION
Commissioner for Patents
Office of PCT Legal Administration
P.O. Box 1450
Alexandria, VA 22313-1450

RESPONSE TO DECISION

Sir:

A Decision was received from the Patent and Trademark Office on July 5, 2011 in the above-referenced patent application indicating that the Notification of Acceptance mailed August 1, 2007 was vacated because the Declaration did not comply with 37 CFR 1.497(a)-(b). Transmitted herewith is a fully executed Declaration (37 CFR § 1.63) for Utility or Design Application Using an Application Data Sheet form for the subject application executed by all the inventors, along with a Supplemental Application Data Sheet.

The Decision also indicates that the Petition Under 37 C.F.R. 1.48(b) filed on November 9, 2007 has not been acted on at this time. By way of this response, Applicants respectfully request consideration of the Petition in due course.

The Commissioner is authorized to charge any fees that may be required by this paper to Deposit Account No. 19-0065.

Respectfully submitted,

Frank C. Eisenschenk, Ph.D.

Patent Attorney

Registration No. 45,332

Phone No.: 352-375-8100 Fax No.: 352-372-5800 Address: P.O. Box 142950

Gainesville, FL 32614-2950

FCE/jb/sl

Attachments: Executed Declaration

Supplemental ADS

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless if displays a valid OMB control number.

DECLARATION (37 CFR 1.63) FOR UTILITY OR DESIGN APPLICATION USING AN APPLICATION DATA SHEET (37 CFR 1.76)

Title of Invention	Novel Pharmaceutical Forms, and Methods of Making and Using the Same						
As the belo	v named inventor(s), I/we declare that:						
This declar	tion is directed to:						
	The attached application, or						
	Application No. PCT/US2005/009305 , filed on MARCH 17, 2005						
	as amended on 9/18/2006; 7/23/2008 (if applicable);						
I/we believe sought;	that I/we am/are the original and first inventor(s) of the subject matter which is claimed and for which a patent is						
I/we have re amendment	viewed and understand the contents of the above-identified application, including the claims, as amended by any specifically referred to above;						
material to became av	I/we acknowledge the duty to disclose to the United States Patent and Trademark Office all information known to me/us to be material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT International filing date of the continuation-in-part application.						
All statements made herein of my/own knowledge are true, all statements made herein on information and belief are believed to be true, and further that these statements were made with the knowledge that willful false statements and the like are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001, and may jeopardize the validity of the application or any patent issuing thereon.							
FULL NAME	OF INVENTOR(S)						
	: MAGALI BOURGHOL HICKEY						
	Magdil United States Cilizen of: UNITED STATES						
	MATTHEW PETERSON						
Signature: _	Citizen of: UNITED STATES						
Inventor thre	e: ORMALMARSSON /						
Signature: _	Citizen of: ICELAND						
Inventor four	MICHAEL J. ZAWOROTKO						
Signature: _	Citizen of; UNITED KINGDOM						
Addition	nal inventors or a legal representative are being named on 1 (one) additional form(s) attached hereto						

This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 1 minute to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Title of Invention: Novel Pharmaceutical Forms, and Methods of Making and Using the Same Application No.: PCT/US2005/009305, filed on March 17, 2005 as amended on 09/18/2006; 07/23/2008

Inventor five: TANISE SHATTOCK

Signature: Citizen of: JAMAICA

Inventor six: JENNIFER McMAHON

Signature: Citizen of: UNITED STATES

Inventor seven: JOANNA BIS

Signature: Citizen of: POLAND

Inventor eight: JULIUS REMENAR

Signature: Citizen of: UNITED STATES

Signature: Mark Town Citizen of: UNITED STATES

Inventor nine: MARK TAWA

Title of Invention	Novel Pharmaceutical Forms, and Methods of Making and Using the Same						
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I his declar	ation is directed to:						
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- w be ilue, a	of smade herein of my/own knowledge are true, all statements made herein on information and belief are believed and further that these statements were made with the knowledge that willful false statements and the like are by fine or imprisonment, or both, under 18 U.S.C. 1001, and may jeopardize the validity of the application or any ag thereon.						
FULL NAME	OF INVENTOR(S)						
Inventor one	MAGALI BOURGHOL HICKEY						
Signature:	Citizen of: UNITED STATES						
	MATTHEW PETERSON						
Signature:	Mothur Left Citizen of: UNITED STATES						
	e: ORN ALMARSSON						
Signature:	Cilizen of: ICELAND						
inventor four	MICHAEL J. ZAWOROTKO						
Signature	Citizen of: UNITED KINGDOM						
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Inventor five: TANISE SHATTOCK					
Signature:	Citizen of: JAMAICA				
Inventor six: JENNIFER MeMAHON					
Signature:	Citizen of: UNITED STATES				
Inventor seven: JOANNA BIS					
Signature:	Citizen of: POLAND				
Inventor eight: JULIUS REMENAR					
Signature:	Citizen of: UNITED STATES				
Inventor nine: MARK TAWA					
Signature:	Citizen of: UNITED STATES				

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless if displays a valid OMB control number.

DECLARATION (37 CFR 1.63) FOR UTILITY OR DESIGN APPLICATION USING AN APPLICATION DATA SHEET (37 CFR 1.76)

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io ne iius, a	is made herein of my/own knowledge are true, all statements made herein on information and belief are believed nd further that these statements were made with the knowledge that willful false statements and the like are y fine or imprisonment, or both, under 18 U.S.C. 1001, and may jeopardize the validity of the application or any g thereon.						
FULL NAME	CF INVENTOR(S)						
inventor one	MAGALI BOURGHOL HICKEY						
Signature:	Citizen of: UNITED STATES						
Inventor (wo	MATTHEW PETERSON						
Signature:	Citizen of: UNITED STATES						
	3: ORN ALMARSSON						
Signature:	Citizen of: ICELAND						
Inventor four	MICHAEL J. ZAWOROTKO						
Signature:	Citizen of UNITED KINGDOM						
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as amended on 09/18/2006; 07/23/2008

Inventor five: TANISE SHATTOCK					
Signature:	Citizen of: JAMAICA				
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Inventor seven: JOANNA BIS					
Signature:	Citizen of: POLAND				
Inventor eight: JULIUS REMENAR					
Signature:	Citizen of: UNITED STATES				
Inventor nine: MARK TAWA					
Signature:	Citizen of: UNITED STATES				

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As the belo	w named inventor(s), I/we declare that:					
This declar	ation is directed to:					
	The attached application, or					
	Application No. <u>PCT/US2605/009305</u> , filed on <u>MARCH 17, 2005</u>					
	as amended on 9/18/2006; 7/23/2005 (if applicable);					
I/we believe sought;	that I/we am/are the original and first inventor(s) of the subject matter which is claimed and for which a patent is					
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All statements made herein of my/own knowledge are true, all statements made herein on information and belief are believed to be true, and further that these statements were made with the knowledge that willful false statements and the like are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001, and may jeopardize the validity of the application or any patent issuing thereon.						
FULL NAM	OF INVENTOR(S)					
inventor ön	E: MAGALI BOURGHOL HICKEY					
	Citizen of UNITED STATES					
inventor two	MATTHEW PETERSON					
Signature:	Cilizen of: <u>UNITED STATES</u>					
Inventor thr	98: ORN ALMARSSON					
Signature:	Cilizen of: ICELAND					
	r: MICHAEL J. ZAWOROTKO					
	Citizen of: UNITED KINGDOM					
[] Addit	onal inventors or a legal representative are being named on 1 (one) additional form(s) attached hersto.					

Additional inventors of a legal representative are being marted on the complete on the complet

Signature: Citizen of: UNITED STATES

Inventor nine: MARK TAWA

Title of Invention	Novel Pharmaceutical Forms, and Methods of Making and Using the Same						
As the balo	w named inventor(s), I/we declare that:						
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FOLL NAM	AE OF INVENTOR(S)						
Inventor o	ne: MAGALI SOURGHOL HICKEY						
Signature	CHERRY OF CHILD STATES						
inventor to	WC: UATHEV PETERSCH						
•	Citizen of: UNITED STATES						
	TRE ORN ALMARSSON						
Signature	THE CONTROL OF THE PROPERTY OF						
inventor f	CUI MICHAEL I ZANOROTRO						
Signature	Citizen of UNITED KINGBOM						
ra an	dnional inventors or a legal representative are taking named on 1 (one) additional form(s) attached beleto						

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FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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Inventor seven: JOANNA BIS	Chizzan of: POLAND				
Signature:	CHAROL I OLA SVA				
Inventor eight: JULIUS REMENAR					
Signature	_ Citizen of: UNITED STATES				
Inventor nine: MARK TAWA					
Signature	_ Citizen of: UNITED STATES				

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FULL NAM	E OF INVENTOR(S)						
Inventor one: MAGALI BOURGHOL HICKEY							
Signature:	Citizen of: UNITED STATES						
Inventor tw	o: MATTHEW PETERSON						
Signature:	Citizen of:						
Inventor th	ree: ORN ALMARSSON						
Signature:	Citizen of:C						
Inventor fo	ur: MICHAEL J. ZAWOROTKO						
Signature:	Citizen of: UNITED KINGDOM						
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as amended on 09/18/2006; 07/23/2008

Inventor five: TANISE SHATTOCK	
Signature:	Citizen of: JAMAICA
Inventor six: JENNIFER McMAHON	
Signature:	Citizen of: UNITED STATES
Inventor seven: JOANNA BIS Signature:	Citizen of: POLAND
Inventor eight: JULIUS REMENAR	
Signature:	Citizen of: UNITED STATES
Inventor nine: MARK TAWA	
Signature:	Citizen of: UNITED STATES

PTO/SB/81 (04-05)
Approved for use through 11/30/2005. OMB 0651-0035
U.S. Petent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERC Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid CMB control number

POWER OF ATTORNEY and CORRESPONDENCE ADDRESS INDICATION FORM

red to respond to a collection of into	umation unless it displays a valid OMB control number.
Application Number	10/599,010
Filing Date	September 18, 2006
First Named Inventor	Magali Bourghol Hickey
Title	Novel Pharmaceutical Forms,
Art Unit	
Examiner Name	
Attorney Docket Number	TPI-5053C3XC1T

I hereby revoke all previous powers of attorney given in the above-identified application.							
I hereby appoint:	7 3		mana approx				***************************************
Practitioners associated with the Customer Number:		23567					
Practitioner(s) named below:							
Name			Registration	on Number	-		
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Applicant/inventor.							
Assignee of record of the entire interest. See 37 Statement under 37 CFR 3.73(b) is enclosed. (F	CFR 3.71. -crm PTO/SB/9	6)					
SIGNATURE of Applicant or Assignee of Record							
Signature (1)200				Date	Feb	-73-7	009
Name JOANNA BIS				elephone	700		ر - حاد
Title and Company		THE RESERVE OF THE PERSON NAMED IN PERSON NAME		******			
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below?.							
*Total offorms are submitted.							

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POWER OF ATTORNEY and **CORRESPONDENCE ADDRESS** INDICATION FORM

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Application Number	10/599,010
Filing Date	September 18, 2006
First Named Inventor	Magali Bourghol Hickey
Title	Novel Pharmaceutical Forms,
Art Unit	W. William Co.
Examiner Name	
Attorney Docket Number	TPI-5053C3XC1T

I hereby revoke all previous powers of attorney given in the above-identified application.								
Ther	eby appoint:							
Ø,	Practitioners associated	with the Customer Number;		23	557			
Practitioner(s) named below:								
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l am t	CONTROL OF A CASE OF THE PARTY			- Altron				
	Applicant/inventor.							
Assignee of record of the entire interest. See 37 CFR 3.71, Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)								
SIGNATURE of Applicant or Assignee of Record								
Signature Date 11-6-2008								
Name					1	Telephone	317-276-1542	
Title and Company Eli Lilly 9 (impany								
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one algorithm is required, see below.								
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Application Information

Application No.:: 10/599,010

Filing date:: 09/18/06

Application Type:: Regular (National Stage)

Subject Matter:: Utility

Suggested Classification:: None

Suggested Group Art Unit::

CD-ROM or CD-R?::

None

Number of CD disks::

None

Number of copies of CDs::

None

Sequence submission?:: None

Computer Readable Form?:: No

Number of Copies of CRF:: None

Title:: NOVEL PHARMACEUTICAL FORMS, AND METHODS

OF MAKING AND USING THE SAME

Attorney Docket Number:: TPI-5053C3XC1T

Request for Early Publication::

Request for Non-Publication::

No

Suggested Drawing Figure:: None

Total Drawing Sheets:: 17

Small Entity?:: No

Petition included?:: No

Petition Type:: N/A

Secrecy Order in Parent Appl.?:: No

Applicant Information

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Unknown

Inventor One Given Name:: Magali Bourghol

Family Name:: Hickey

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State or Province of Residence:: MA

Country of Residence:: US

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Country of Mailing Address:: US

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Applicant Information

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Unknown

Inventor Two Given Name:: Matthew L.

Family Name:: Peterson

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State or Province of Residence:: MA

Country of Residence:: US

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City of Mailing Address:: Hopkinton

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Applicant Information

Applicant Authority Type:: Inventor

Primary Citizenship Country::

Status:: Unknown

Inventor Three Given Name:: Örn

Family Name:: Almarsson

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State or Province of Residence:: MA

Country of Residence:: US

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City of Mailing Address:: Shrewsbury

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Country of Mailing Address:: US

Postal or Zip Code of Mailing Address:: 01545

Applicant Information

Applicant Authority Type:: Inventor

Primary Citizenship Country:: UK

Status:: Unknown

Inventor Four Given Name:: Michael J.

Family Name:: Zaworotko

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State or Province of Residence:: FL

Country of Residence:: US

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City of Mailing Address:: Tampa

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Country of Mailing Address:: US

Applicant Information

Applicant Authority Type:: Inventor

Primary Citizenship Country:: JM

Status:: Unknown

Inventor Five Given Name:: Tanise

Family Name:: Shattock

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State or Province of Residence:: FLNJ

Country of Residence:: US

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City of Mailing Address:: Orlando Montville

State or Province of mailing address:: FLNJ

Country of Mailing Address:: US

Postal or Zip Code of Mailing Address:: 3280807045

Applicant Information

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Unknown

Inventor Six Given Name:: Jennifer

Family Name:: McMahon

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State or Province of Residence:: FLIN

Country of Residence:: US

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City of Mailing Address:: TampaZionsville

State or Province of mailing address:: FLIN

Country of Mailing Address:: US

Applicant Information

Applicant Authority Type:: Inventor

Primary Citizenship Country:: PL

Status:: Unknown

Inventor Seven Given Name:: Joanna

Family Name:: Bis

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State or Province of Residence:: TampaNC

Country of Residence:: US

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State or Province of mailing address:: TampaNC

Country of Mailing Address:: US

Postal or Zip Code of Mailing Address:: 33613

Applicant Information

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Unknown

Inventor Eight Given Name:: Julius F.

Family Name:: Remenar

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State or Province of Residence:: MA

Country of Residence:: US

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City of Mailing Address:: Framingham

State or Province of mailing address:: MA

Country of Mailing Address:: US

Applicant Information

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Unknown

Inventor Nine Given Name:: Mark

Family Name:: Tawa

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State or Province of Residence:: MA

Country of Residence:: US

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City of Mailing Address:: Acton

State or Province of mailing address:: MA

Country of Mailing Address:: US

Postal or Zip Code of Mailing Address:: 01720

Representative Information

Representative Customer Number:: 000023557

Correspondence Information

Correspondence Customer Number:: 000023557

Telephone Number One:: (352) 375-8100

Telephone Number Two::

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Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This application is a	National Stage of	PCT/US2005/009305	March 17, 2005
PCT/US2005/009305	An application claiming the benefit under 35 USC 119(e) of	60/554,834	March 19, 2004
And And And		60/566,647 60/610,296 60/637,907	April 30, 2004 September 16, 2004 December 21, 2004
			D000111201 21, 2001

Assignee Information

Assignee Name:: TransForm Pharmaceuticals, Inc.

Street of Mailing Address:: 29 Hartwell Avenue

City of Mailing Address:: Lexington

Country of Mailing Address:: MA

Postal or Zip Code of Mailing Address:: 02421

Assignee Information

Assignee Name:: University of South Florida

Street of Mailing Address:: 3802 Spectrum Blvd., Suite 100

City of Mailing Address:: Tampa

Country of Mailing Address:: FL

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Frank C. Eisenschenk, Ph.D.

Reg. No. 45,332 July 29, 2011